Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective-January-1, 2003

	· · · · · · · · · · · · · · · · · · ·		uvç bandı		10/022-80999							
		CLAIMS A	S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY TYPE			OTHER THANK	
TOTAL CLAIMS		77				ſ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS.		/ minus 3 =							1	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT		· · · · · · · · · · · · · · · · · · ·	\boxtimes				OR		
* If the difference in column 1 is less than zero, enter						olumn 2	' [+140=		OR	+280=	210
in .			TOTAL		OR	. TOTAL	7050					
		(Column 1)	المراجعة المراجعة المراجعة	MENDED - PART II (Column 2) (Column 3			. •	SMALL	ENTITY	OR	OTHER SMALL	
MENDMENTA	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID		BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total +	7	Minus	**		=		X\$ 9=		OR	X\$18=	
¥	Independent	TATION OF THE	Minus	A.	O1 A114	=		X42=		OR:	X84=	*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							L	TOTAL	er Amerika w	OR	TOTAL	
(Column 1) (Column 2) (Column 3)							_ Ai	DDIT. FEE			addit. Fee]	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		• • •	Minus	**	· .	=		X\$ 9=		OR	X\$18=	
	Independent + FIRST PRESENT	FATION OF MI	Minus	***	CL AIRA	<u> -</u>	lΓ	X42=		OR	X84=	
	THOTTHEOLIN	INTO OF WE	CHIPLE DEF	ENDENT	CLAIN		֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֡֓֓֓֡֓֓֡	+140=		OR	+280=	
	• • • • • • • • • • • • • • • • • • • •						ΑŪ	TOTAL DDIT. FEE	ل ــــــــــــــــــــــــــــــــــــ	OR	TOTAL ADDIT. FEE	
	F.	(Column 1) CLAIMS	i ka isang	(Colum		(Column 3)				· · ·		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM8 PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total *		Minus	**		= ^		X\$ 9=		OR	X\$18=	
	Independent *		Minus	***		=		X42=		1	X84=	
	FIRST PRESENT	TATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		 -			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140= .		OR.	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OTAL ADDIT. FEE ADDIT. FEE											,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
i	he "Highest Numbe	r Previously Paid	For (Total or	Independe	nt) is the	no, enter 3. highest numbe	r found	in the app	ropriate box	in cal	umn 1.	